FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

PROCESSED

Washington, D.C. 20549

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THOMSON FINANCIAI

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION **OMB APPROVA**

OMB Number: 3235-0076

May 31, 2002 Expires:

Estimated average burden

hours per response.....16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change. Shares of Stock in Apis Global Deep Value Offshore, Ltd. Section 4(6) Filing under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 □ New Filina Type of Filing: ⊠Amendment A. BASIC IDENTIFICATION DATA 1. Enter the information requested about the issuer Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Apis Global Deep Value Offshore, Ltd. Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) c/o Apis Capital Advisors, LLC (203) 364-8675 53 Forest Avenue, Suite 103 Old Greenwich, Connecticut 06870 Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices) **Brief Description of Business** Private investment company engaged in seeking capital appreciation through investment. Type of Business Organization corporation limited partnership, already formed Sother (please specify): Cayman Islands Exempted Company business trust ☐ limited partnership, to be formed MONTH YEAR Actual or Estimated Date of Incorporation or Organization: □ Actual ☐ Estimated 0 9 5 0 Jurisdiction of Incorporation or Organization: (Enter two- letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) F Ν General Instructions Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seg. or 15 U.S.C. 77d(6). When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address. Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549. Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures. Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC. Filing Fee: There is no federal filing fee. State: This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on the ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. ATTENTION Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays

a currently valid OMB control number

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A. BASIC IDENTIFICATION DATA

2. Enter the information requested for the following:

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- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general managing partners of partnership issuers; and
- Each general and managing partnership of partnership issuers.

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Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or
Apis Capital Advisors, I	LLC				Managing Partner
Full Name (Last name first, i					
53 Forest Avenue, Suite	103	Old Greenwich	Connecticut	06870	
Business or Residence Addr		r and Street, City, State, Zip			
		<u> </u>			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	General and/or
Werber, Steven A. Jr.		0 15 9			Managing Partner
Full Name (Last name first, i	f individual)				1=0
c/o Apis Capital Adviso	rs IIC 53 Fores	st Avenue Suite 103	Old Greenwich	Connecticut	06870
Business or Residence Addr		r and Street, City, State, Zip		Comiconoat	00070
		II 			
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer		General and/or
Bree, David					Managing Partner
Full Name (Last name first, i	f individual)				
		h A Suite 102	Old Craamuiah	Campantiant	00070
c/o Apis Capital Adviso Business or Residence Addr	res, LLC 53 Fores	r and Street, City, State, Zip	Old Greenwich Code)	Connecticut	06870
	,		,		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer		General and/or
, , , , , , , ,	e e		_		Managing Partner
Seymour, Don Full Name (Last name first, i	f individual)	<u> </u>	<u> </u>		
·		_			
c/o Apis Capital Adviso Business or Residence Addr		st Putnam Avenue r and Street, City, State, Zip	Old Greenwich	Connecticut	06870
business of Residence Addr	ess (Mulliber	r and Street, City, State, Zip	Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or
Check Box(es) that Apply.		Deficition Owner	☐ Executive Officer	□ Director	Managing Partner
Full Name (Leat name first i	findividual\				
Full Name (Last name first, i	r individuar)				
Business or Residence Addr	/NI	and Charle City Chair 7	C-1-\		
business or Residence Addi	ess (Number	r and Street, City, State, Zip	Code)		
Charle Day () that A-all		D. D. and C. and C.		——————————————————————————————————————	
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	L Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Business or Residence Addr	ess (Number	r and Street, City, State, Zip	Code)		
		k I			
	(Use blank st	heet, or copy and use additi	onal copies of this sheet, as ne	ecessary.)	
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		F			
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B. INFORMATION ABOUT OFFERING								
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?	Yes	No						
2. What is the minimum investment that will be accepted from any individual?								
3. Does the offering permit joint ownership of a single unit?	Yes ⊠	No						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchases in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.								
Full Name (Last name first, if individual)								
N/A								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All Stat	tes						
[AL]	[HI]	[ID] <u></u>						
[IL] [N] [N] [M] [M] </td <td>[MS] [OR] [WY] </td> <td>[MO] </td>	[MS] [OR] [WY]	[MO]						
Full Name (Last name first, if individual)								
N/A								
Business or Residence Address (Number and Street, City, State, Zip Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	☐ All S	tates						
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(il.) (in)	[MS]	[MO] [[PA] [] [PR] []						
Full Name (Last name first, if individual)								
N/A Business or Residence Address (Number and Street, City, State, Zip Code)								
business of Residence Address (Number and Street, City , State, 21) Code)								
Name of Associated Broker or Dealer								
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers								
(Check "All States" or check individual States)	□All S	tates						
[AL]	[HI]							
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MN] [MN] [MN] [MD] [MA] [MI] [MN] [MN] [MD] [MA] [MI] [MN]	[MS]	[MO]						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)								

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	SE OF PROCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold		
Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sqrt{\text{and}} \) and indicate in the columns below the amounts of the securities offered for exchange and already exchange	d.	
	Aggregate	Amount Already
Type of Security	Offering Price	Sold
Debt	\$ <u>0</u>	\$ <u>0</u>
Equity	\$ <u>0</u>	\$ <u>0</u>
Convertible Securities (including warrants)	\$ <u>0</u>	\$ <u>0</u>
Partnership Interests (See Exhibit A hereto)	\$200,000,000	\$ <u>635,867.65</u>
•		
Other (Specify)	\$ <u>0</u>	\$ <u>0</u>
Total	\$ <u>200,000,000</u>	\$ <u>635,867.65</u>
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicathe number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate Dollar Amount of Purchases
Accredited Investors	<u>3</u>	\$ <u>635,867.65</u>
Non-accredited Investors	<u>0</u>	\$ <u>0</u>
Total (for filing under Rule 504 only)	<u>N/A</u>	\$ <u>N/A</u>
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Dollar Amount
Type of offering	Type of Security	Sold
Rule 505	<u>N/A</u>	\$ <u>0</u>
Regulation A	<u>N/A</u>	\$ <u>0</u>
Rule 504	<u>N/A</u>	\$ <u>0</u>
Total	<u>N/A</u>	\$ <u>0</u>
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees.		\$ <u>0</u>
Printing and Engraving Costs	🖂	\$ <u>2,000</u>
Legal Fees		\$ <u>27,500</u>
Accounting Fees		\$ <u>30,000</u>
Engineering Fees		\$ <u>0</u>
Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
Other Expenses (identify) Various blue sky filing fees		
Total		\$ <u>64,500</u>
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•	/ E		
C. OFFERING PRICE,	NUMBER OF INVESTORS, EXPENSES	AND USE OF PROCEEDS	
 Enter the difference between the aggreg tion 1 and total expenses furnished in response the "adjusted gross proceeds to the issuer. 	onse to Part C - Question 4.a. This differe	nce is	\$ <u>199,935,500</u>
 Indicate below the amount of the adjusted gro for each of the purposes shown. If the amoun check the box to the left of the estimate. The gross proceeds to the issuer set forth in response 	nt for any purpose is not known, furnish an es total of the payments listed must equal the a	stimate and adjusted Payments to	
		Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		🗆 \$	□ \$
Purchase of real estate		🗆 \$	\$
Purchase, rental or leasing and insta	allation of machinery and equipment	🗆 \$	\$
Construction or leasing of plant buildi	ings and facilities	🗆 \$	\$
	ng the value of securities involved in this		
	e for the assets of securities of another	🗆 \$	\$
Repayment of indebtedness	" 	🗆 \$	□ \$
Working capital		🗆 \$	\$\frac{199,935,500}{}
Other (specify):	1 1 1	\$	S
	í.		
		 	\$
			\$199,935,500
Total Payments Listed (column totals	added)	\times \\$\frac{199,9}{1}	35,500
	D. FEDERAL SIGNATURE	· · · · · · · · · · · · · · · · · · ·	
The issuer has duly caused this notice to be sollowing signature constitutes an undertaking request of its staff, the information furnished because (Print or Type)	by the issuer to furnish to the U.S. Security the issuer to any non-accredited investo	ties and Exchange Commiser pursuant to paragraph (b)(sion, upon written
	Signature	S/21/06	
Apis Global Deep Value Offshore, Ltd. Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Steven A. Werber, Jr.	Director of Issuer		
	!! 		
	" - 		
	ATTENTION		
Intentional misstatements or or	missions of fact constitute federal crimi	nal violations. (See 18 U.S	S.C. 1001.)
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		E. STA	ATE SIGNATURE			
1.	Is any party described in 17 CFR 230.252(c), of such rule?	(d), (e) or (f) p	resently subject to any disc	qualification provisions	Yes	No ⊠
	See	e Appendix, Co	olumn 5, for state response).		
2.	The undersigned issuer hereby undertakes to Form D (17 CFR 239.500) at such times as re			state in which this notice is	s filed, a i	notice on
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the	state administrators, upon	written request, informatio	n furnish	ed by the
4.	The undersigned issuer represents that the is Limited Offering Exemption (ULOE) of the sta of this exemption has the burden of establish	ate in which thi	is notice is filed and unders	stands that the issuer claim		
	e issuer has read this notification and knows the dersigned duly authorized person.	ne contents to	be true and has duly caus	ed this notice to be signed	on its be	half by the
	suer (Print or Type) bis Global Deep Value Offshore, Ltd.	Signature SZ	L-C.	8/21/06		
	ame of Signer (Print or Type)	Title (Print or	r Type)			
St	even A. Werber, Jr.	Director of I	ssuer			
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Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1	2	?	3	!		4	· · · · · · · · · · · · · · · · · · ·		5
	Intend to non-ac investors (Part B	ccredited in State	Type of Security and aggregate offering price offered in state (Part C-Item 1)	:	Type of investor and amount purchased in State (Part C-Item 2)		Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
				Number of Accredited		Number of Non- Accredited			
State	Yes	No	Share	Investors	Amount	Investors	Amount	Yes	No
AL									
AK				 					
AZ							-		
AR									
CA									
со									
СТ		X	200,000,00	3	\$635,867.65	0	0	-	X
DE							<u></u>		
DC							·	-	
FL									
GA				<u> </u>					
HI								<u> </u>	
1D								-	
IL								-	
IN								 	
IA	<u>-</u>								
KS									
KY									
LA	_						<u> </u>		
ME									
MD							····		
МА									
MI									
MN									
MS									
MO					7 of 8				

APPENDIX

7	Intend to non-ac investors (Part B-	to sell ccredited in State	Type of Security and aggregate offering price offered in state (Part C-Item 1)					Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No	Share	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT	res	NO	Snare	investors	Amount	investors	Amount	168	INO	
NE					[]					
NV	•									
NH										
NJ										
NM										
NY										
NC					} -					
ND										
ОН										
ок										
OR										
PA										
RI									_	
sc								_		
SD										
TN					1					
TX										
UT										
VT										
VA										
WA				1	!					
WV										
WI										
WY										
PR				1						

EXHIBIT A

Apis Global Deep Value Fund, Ltd. ("Fund") is a Cayman Islands exempted company formed to pool investment funds of investors for the purpose of investing and trading in wide variety of securities and financial instruments, domestic and foreign, of all kinds and descriptions, whether publicly traded or privately placed, including but not limited to common and preferred stocks, bonds and other debt securities, convertible securities, limited partnership interests, mutual fund shares, options, warrants, commodities, futures, derivatives (including swaps, forward contracts and structured instruments), currencies, monetary instruments and cash and cash equivalents. The Fund is offering the shares (the "Shares") to persons and entities outside of the United States that are not U.S. Persons and to a limited number of U.S. Persons that are generally exempt from U.S. federal income taxation, and who meet other suitability requirements Although there is no maximum or minimum aggregate amount of Shares which may be sold in this continuous offering, we have inserted the figure of \$200,000,000 in Part C(1) of Form D as a reasonable estimate of the aggregate offering price of such Shares.